115000051228

(Requestor's Name)					
(Address)					
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(City/State/Zɪp/Phone #)					
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(Document Number)					
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Rachel O'Hayer rachel.ohayer@cscglobal.com

Date: June 14, 2017

Order#: 681018/001

Re: MILLENNIAL TITLE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Rachel O'Hayer c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are $\overline{\phi}$ any problems or questions with this filing, please call our office.

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: MILLENNIAL TITI	LE, LLC		
7	(a)	4501 EAST COLUMBUS DRIVE	(b)	4501 E	AST COLUMBUS DRIVE
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- , ,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		TAMPA FL 33605		TAMPA,	FL 33605
		03/23/2015		L 1500005	51228
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	UNITED STATES CORPORATION AGENTS, INC.			
	` '	Registered Agent and Registered Office shown on the records of the	e Florida l	ept. of State	e:
		13302 WINDING OAK COURT A			
		Registered Office Address (MUST BE FLORIDA STREET AL	DRESS)		-
					-
		TAMPA	33612		-
	(b)	Corporation Service Company	_		
		Enter name of NEW Registered Agent and/or NEW Registered O	ffice ad <u>d</u> i	ress:	(= =
		1201 Hays Street			
		NEW Registered Office Address:			
			<u> </u>		
					S
		Tallahassee	32301		
the ag wa the	e cha ent v as/we e arti	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabore authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liabore of member or authorized representative of a member.	he regist sility cor the limi mited li	ered officonpany, it i ted liabilit ability con	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
I pr th to no	herei ovisi e obl mere otifica	by accept the appointment as registered agent and agre- ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. The Finantiaing of this change.	erforma for in C ereby co	nce of my hapter 60: nfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5. F.S. Or, if this document is being filed